FORM 4	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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<u>0</u>2)

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)		1										
1. Name and Address of Reporting F McNab Connie McCombs	2. Issuer Name an Live Nation, Inc		or Tra	nding Syn	nbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) C/O LIVE NATION, INC., 934 CENTER DRIVE	3. Date of Earliest 01/15/2010	Transaction	n (Mo	onth/Day/	/Year)	Officer (give title below)	Other (specify b	below)				
(Street) BEVERLY HILLS, CA 90210	4. If Amendment, I	Date Origir	nal Fi	led(Month/	Day/Year	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State)	(Zip)	Tab	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if Code (A) or Dispo				isposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership of Form: B Direct (D) O	Beneficial Ownership		
			Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)		
Common Stock	01/15/2010		А		13,997	А	\$ 0 (1)	31,661	D			
Common Stock								260,071	Ι	See Footnote		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	. Numl	ber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of	f		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	D	erivati	ive	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	ecuriti	es			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Α	cquire	d			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A	A) or				4)			Following	Direct (D)	
					D	ispose	d						Reported	or Indirect	
						f (D)							Transaction(s)	< / <	
						nstr. 3							(Instr. 4)	(Instr. 4)	
					4,	, and 5	)								
											Amount				
								Date	Expiration		or				
								Exercisable	•	Title	Number				
								Excicisable	Date		of				
				Code V	/ (4	A) (I	D)				Shares				

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
McNab Connie McCombs C/O LIVE NATION, INC. 9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210	Х						

### Signatures

Kathy Willard, Attorney-in-Fact for Connie McCombs McNab 01/20/2010 Date \*\*Signature of Reporting Person

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

- (1) Represents a restricted stock award. These shares will vest in full on the first anniversary of the grant date and are subject to a contractual restriction on resale which expires on the third anniversary of the grant.
- (2) Connie McCombs McNab's indirect beneficial ownership includes 260,071 shares held by McCombs Family Ltd., over which Ms. McNab has shared investment or voting authority.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.